

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N21778

FILED
Jan 14, 2010
Secretary of State

Entity Name: CLAIRMONT CONDOMINIUM A ASSOCIATION, INC.

Current Principal Place of Business:

10205-10572 CLAIRMONT CIR
TAMARAC, FL 33321 US

New Principal Place of Business:

Current Mailing Address:

C/O GOLDMAN JUDA & MARTIN P.A.
8211 W BROWARD BLVD STE #PH1 5TH FL
PLANTATION, FL 33324

New Mailing Address:

FEI Number: 59-2843223

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SCHUSTER, LOUISE
10510 E CLAIRMONT CIRCLE
FORT LAUDERDALE, FL 33321 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

OFFICERS AND DIRECTORS:

Title: T
Name: REINHARDT, MYRNA
Address: 10536 E. CLAIRMONT CR
City-St-Zip: TAMARAC, FL 33321

Title: PD
Name: SCHUSTER, LOUISE
Address: 10510 E CLAIRMONT CIR
City-St-Zip: FORT LAUDERDALE, FL 33321

Title: D
Name: LEVINE, AMELIA
Address: 10540 E CLAIRMONT CIR
City-St-Zip: FORT LAUDERDALE, FL 33321

Title: SD
Name: BROOKS, MARSHA
Address: 10514 E CLAIRMONT CIR
City-St-Zip: FORT LAUDERDALE, FL 33321

Title: SD
Name: KEERY, RITA
Address: 10568 E CLAIRMONT CIR
City-St-Zip: FORT LAUDERDALE, FL 33321

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: LOUISE SCHUSTER

PD

01/14/2010

Electronic Signature of Signing Officer or Director

Date